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Community Health Information and Links,
Leeds (CHILL) Evaluation

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CHILL EVALUATION

Introduction

CHILL (Community Health Information and Links, Leeds) is a new project to train and support volunteers that is being developed and delivered by Women's Health Matters (WHM). The broad aims of the project are to enhance the knowledge, skills and confidence of individual volunteers, and to increase organisational and community capacity through the role of the volunteers in supporting women's health groups and other community activities.

The project works with women from a range of often marginalised backgrounds and many are disabled, have experience of mental and physical ill-health, discrimination and domestic violence. According to one staff member, it aims to enable women to "*cross... barriers in terms of personal experience*". This is achieved through the delivery of a programme of activities which will both facilitate increased confidence for individual participants, provide opportunities for them to learn about issues affecting women in general, and also the range of issues faced by women the organisation works with. This includes multiple forms of discrimination and barriers to accessing services. Another dimension of the project is to enable volunteers to develop skills necessary in setting up, facilitating and managing groups. Training is delivered through a combination of means: by WHM staff and, where necessary, by people with specialist skills or knowledge from outside the organisation.

A group of 16 women volunteers is currently undergoing training (including four Leeds Metropolitan University students), with the aim of eventually working with various self-help and community groups.

The Centre for Health Promotion Research, Leeds Metropolitan University, was commissioned to undertake a small-scale evaluation of the CHILL project in Autumn 2008. The aim of the evaluation was to develop an understanding of volunteers' experiences of the CHILL project. Specifically, the objectives were to evaluate:

- the impact of the CHILL project on volunteers;
- the extent to which volunteers have engaged in health activity and any links to a career path in health;
- the quality of volunteering experience with WHM;
- the distinctive value of volunteering in a women-only organisation;
- students' experiences and integration in the project.

Methods

An initial workshop was held with five CHILL participants after a training session. Some had been involved in the project for some time, others were new to it. The purpose of the workshop was to meet volunteers, introduce

them to the evaluation and the research team in a very informal and non-threatening way and in an environment familiar to them, and to begin to find out how and why they had become involved with the project. Using interactive methods, volunteers were invited to map their journeys to the CHILL project.

Along with a further three women (including one student), two of the workshop participants then went on to take part in one-to-one interviews which were loosely structured with the use of a topic guide, but allowed participants to tell their own stories. Two members of staff were also interviewed. Interviews were digitally recorded and transcribed with participants' consent. The transcripts were read by two members of the research team to ensure inter-rater reliability and qualitative analysis of the data was carried out using Framework, a method developed by the National Centre for Social Research. Using an inductive approach, descriptive codes were developed from the transcripts and charts were developed which focused on:

- participants' journeys into volunteering
- skills and knowledge (both existing and those developed through CHILL)
- issues specific to CHILL/WHM (including what CHILL/WHM offer that is not offered through organisations; why it is important to work in a women-only context; and what they would like to see changed or done differently).

This report focuses on the experiences of CHILL volunteers. However, reference is made to staff interviews where these were directly relevant.

Journeys into Volunteering

Volunteers found out about CHILL from a variety of sources. One had previously been involved with WHM as a participant and read about the project in a WHM newsletter. Others found out about it via other Leeds-based voluntary organisations or resource centres. The student was told about the project by a university lecturer.

Motivations

Volunteers were invited to talk about their motivations for volunteering and what they hoped to do with the knowledge and skills gained from their involvement in CHILL. Some spoke of wanting to get involved in their communities, of wanting to *"widen my experiences"*, and to *"enrich my life"*. This was particularly the case for disabled women who felt that they needed *"to get out more"*. One woman had previous experience of being helped as a participant through WHM and wanted to *"give something back"*. Another volunteer stated that she was interested in volunteering because she wanted to change her career pathway and that one particular aspect of the CHILL training programme could help her to achieve that. Other volunteers also

acknowledged that it might enhance their employability¹ and would be a positive inclusion on a C.V.² For the latter, the focus of CHILL was particularly fitting given that she was interested in pursuing a career in social work or counselling.

Timing

The timing of their decision to volunteer was particularly salient among those volunteers who had experienced ill-health. One woman said that she now felt ready to be more active, while another said:

"I'm a bit stronger now, a bit more together and I felt like I could give something back to somebody else in a similar sort of place to me ...So I'd started to get back together but I didn't want to come in to do full-time work because I thought that would be too much. So I thought maybe I could just volunteer a bit and try and help some people to see that you're not just your breakdown. It's not the end of your life, you are different after, it but it doesn't have to be the end" (Volunteer 4).

For one participant, volunteering represented an opportunity to try something different and embrace a new challenge:

"I've been (in) one place for a long time doing the same things over and over again and this is another challenge. I wanted a change in the challenge" (Volunteer 1).

Ambitions

All the volunteers spoke of wanting to work in their local communities in some way. The nature of their aspirations varied and some were further along than others in seeing these realized. One volunteer said that she hoped that the skills in running groups and drop-in sessions she had learnt through CHILL would help her in *"getting a foot in the door"* in terms of accessing paid employment in the field in which she was interested. Another woman said that she would like to volunteer in a group after her training as *"I feel I could help somebody somewhere"*.

Other volunteers had already started to implement their knowledge and skills. For example, one woman, who was already co-facilitating a WHM group, was about to start running her own groups in the community. For this volunteer, her ambition was to reach as many women as possible and to achieve diversity in terms of reach and access, enabling women from different backgrounds and different experiences to work with each other:

"Well for me I'm trying to break away from the idea that disabled women can only work with disabled women ...We're trying to work with

¹ Woman who had been out of work some time due to illness

² Student

as many women as we can. The aspiration is to take the groups and things out to as many women as we can” (Volunteer 4).

For one disabled woman, she had already been involved in setting up a group to teach people about disability and hoped that she would be able to extend this by talking to health professionals in order to enable them to understand how to treat disabled people.

Skills and Knowledge

Existing Skills

Participants acknowledged bringing a range of different skills, knowledge and experiences to volunteering. These included being *“a good listener”*, motivation and specific knowledge of public health gained through study. One volunteer suggested that she brought:

“...having a younger person’s attitude toward things a bit more, a bit more twenty first century I suppose” (Volunteer 5).

For some volunteers, previous work or voluntary experiences were believed to be valuable in working with and understanding people. For others, their life experiences equipped them with a capacity for empathy; for example, physical impairment, ill-health, family background, which are invaluable in working with others and to helping people unlike themselves understand what life is like for others.

Outcomes of CHILL: personal

“I think it’s really changing my life around and making me feel worthwhile”.

The social benefits of participation of CHILL were cited as a particular benefit for women who were disabled or had experiences of being housebound. Taking part in the project had increased their social circle, enabled them to be *“part of society again”* and enabled one woman to extend her activities to include going to the pub and cinema without fear of being attacked.

Increased confidence was not something that was specific to this particular group of women. Indeed, it was unanimously cited as a positive personal outcome from participation in CHILL and one staff member reported a number of examples of women whose confidence had increased enormously during their participation in the project. Among the volunteers interviewed for this evaluation, this ranged from confidence in speaking to other people, in speaking about their own health, to public speaking and increased confidence in running groups. One volunteer described her experience through CHILL as personally empowering, enabling her to challenge the wisdom of health professionals in relation to her own care:

"Now I don't think the doctors are this big thing, or some kind of God ...Sometimes I sit there and I think 'You're so stupid' or 'You don't value me'" (Volunteer 4).

Another explained how involvement in CHILL had enabled her to extend the possibilities circumscribed by her condition:

"I think it makes me aware of what I'm capable of. It's made me aware that I can do things and that I don't have to be in the house all the time" (Volunteer 3).

Women spoke of adapting their own health behaviours in view of their experiences through CHILL; for example, in eating more healthily. One woman described how participation in the project has enabled her to understand her illness more and the limitations that this imposed on her ability to take too many things on. This volunteer had a long-term, fluctuating condition which meant that she could have periods of wellness interspersed with exacerbations triggered by over-exertion. She explained that:

"I do feel really well but I know I do have [condition], because I did two things for CHILL, I did something one day and then something the next day and I was quite exhausted really, so much so that I was near relapsing, and it made me realise that when you're with [condition] you think you're better and you're not really. ...I know how much to take on and, in CHILL, I know what I can do and I know the things that I volunteer for I will be able to do..." (Volunteer 3).

Another volunteer, who belonged to an older generation of disabled women who had never previously been taught about their anatomy, explained that she had learned important information about how her body works which she has since gone on to research further and has subsequently collated and recorded to share with others.

Outcomes of CHILL: knowledge/skills/awareness

Volunteers reported that they had had fairly open expectations of CHILL and the training offered through it, but they also came away with more than they had expected. One woman said that she had not:

"...expect(ed) it to be so long. It's between 10-12 sessions, but some of them are all day, like 10-3... so that's quite a lot of training, but there's quite a lot to get through" (Volunteer 4).

Although the training might have been longer than expected, this was perceived as both necessary and as a *"good thing, because it gave us chance to get to know each other properly and the space to be confident enough to say those things"*.

Among those issues which volunteers had perhaps not expected to learn about were racism, sexism and domestic violence. Some volunteers explained that the training had enabled them to see things from other people's perspectives. Describing a session in which discrimination was being discussed one volunteer reflected:

"...one of the ladies is disabled and she's part of WHM and she came and talked to us and shared her problems with us about the discrimination that she faces. It kind of opens your eyes a bit more ... It's made me more aware of issues out there" (Volunteer 5).

Another volunteer reflected on why these skills were so important in undertaking voluntary work in the community:

"I've learnt lots of new things that I didn't know before in the different areas we did. And how to be with people as well, you know you might not have been like that before. It makes you think differently as well because everybody gets things wrong, so how to step back a bit and have a think before you say stuff. We did about disability as well, and quite a few of the girls are in wheels chairs, so it's how to be with people" (Volunteer 2).

One volunteer went further in reflecting upon the questions she had asked herself following a session in which racism was discussed:

"Obviously I know what racism is...it makes you look and think now what would it be like, do I need to examine it? When I joined the training I thought 'I don't have any problem with racism'. But then they ask you some questions: 'What would you be like if they did this?' and then you think, 'I am you know, a bit' ...It's the same with people who are bisexual and gay, and how you handle things like that. It was a very interesting course" (Volunteer 4).

Volunteers spoke of a range of practical knowledge which they could use. One woman said that information learnt on the mental health component of the training had, and would continue to be, relevant to her university course.

"I've definitely used some of the topics that we've looked at with CHILL, for instance like the depression... Next year I'm doing a module on women's mental health, so this is definitely relevant" (Volunteer 5).

Others experienced the components on working with groups as invaluable. One volunteer said that she had found the training *"really enlightening"* since she had never considered what running a group would involve. She had been *"thinking of running a group with no expectation, or no backup for myself"*, but now had

"Clarity on each aspect, I know what's expected of me, data protection, confidentiality; from within a group itself, I know what's to be expected of me" (Volunteer 3).

One volunteer went into detail about the specific elements of the training which she found particularly valuable. These included simulating drop-in sessions with other members of the group, leading discussions, identifying and addressing potential issues such as racism, dealing in a helpful and non-judgemental way with women who present problems, and asking for support in dealing with situations with which they lack confidence or were beyond their remit:

"We did things so we could run groups on our own. Some of the groups we can do things with the girls that come, like drop-in sessions. So we learnt how to run a group with them and do a session on the CHILL course, that was good. And we did how to run a discussion properly and how to lead one, that was good. It's not my favourite to do that but it's still got to be done. So I learnt how to be able to do that if we want to do it and how to look after them and that. We did different topics like racism, sexism, recognising what racism was in your groups if anything was going on if you did lead a group or you were bothered about something, we did about confidentiality..." (Volunteer 2).

What CHILL offers that is distinctive

Volunteers' responses around this question can be divided into three domains: content, methods of delivery and support received.

Content

"It's the variety of the different things they do. The different groups they have and the different sessions they hold. The training is pretty good as well. I can't fault what I did on that course and how they did it".

As highlighted in the previous section, the breadth of issues covered by CHILL were cited as a key feature of the CHILL experience and volunteers valued elements which focused on learning about their own bodies, preparation for facilitating their own groups, and opportunities to visit other groups. One volunteer also valued being given a choice about what to do, and time to make her choices.

Delivery

According to one member of staff, training is delivered in small units, with entry points staggered so that volunteers could access the programme when it was convenient to their needs once the induction programme had been completed. This flexibility was cited by volunteers as a great strength of the

training programme. This was particularly important to students who had to fit their activities around their studies, and for volunteers who need flexibility around their health conditions, or school holidays.

Volunteers valued the interactive and accessible nature of the training, which does not emphasise written work, but rather focuses on the discussion of issues among group members. For this reason, the group context was perceived to be valuable and, given the sensitive and personal nature of some of the topics covered, a women-only environment was considered to be important (this is discussed further below). Although the programme of activities is long, this was also perceived to be important in allowing trust and rapport to develop between volunteers, facilitating greater depth to discussions.

Support

“I think they’re a good voluntary group to work for just because they offer a lot of help to you as well. Instead of always, some voluntary groups are about taking and they don’t give anything back, but I think CHILL do a bit of both which is good”.

This comment succinctly reflects the views of many of the volunteers: what they received back from WHM was what sets it apart from other voluntary organisations. Indeed, one staff member emphasised that much of her time is spent enhancing volunteers’ self-esteem. This member of staff said:

“...For some of them, no one will ever have told them before in their whole lives that they’re good at something and that they can do something. It makes me cry, sometimes, with anger about the crap that goes on in their lives, but also with absolute admiration for their determination to do this... I can’t tell you how many barriers the individuals have had and how many different kinds of support I’ve given and a lot of it has been practical and a lot of it has been about just meeting people, face to face stuff just saying “let’s go to a coffee and talk it through” or “just tell me about what’s going on”. And sometimes I’ve felt like a careers advisor and sometimes I’ve felt like a counsellor and sometimes I’ve felt like a mum. All that stuff I think that’s what makes the difference to them being able to carry on participating” (Staff Member 2).

Interestingly, the type of personal support highlighted by this staff member was not something highlighted by volunteers. Although they highlighted organisational support they received as enabling, this tended to emphasise practical factors. For some women, their participation was supported through reimbursement for childcare and/or travel expenses. For disabled women, in particular, the organisation provides logistical and practical support (such as organising and paying for transport) which enables them to participate in activities which they would otherwise be excluded from. The emphasis is

clearly on 'ability, not disability', on supporting women to play to their strengths and enabling disabled women to *"put your disability away and forget about [it] and just think you haven't got one"*. A member of staff explained that for her, the objective was to emphasise to disabled women that they are *"valid, rather than in-valid, invalid"*. One volunteer, who complained of having always been talked over and referred to as 'she', reported that this was the first time in which she had had *"a name... I've got a name at last"*. None of the disabled volunteers highlighted the personal assistant support provided by WHM. Reassured that support and advice is always available, regardless of whether the query is relevant to training/volunteering, volunteers experienced CHILL as *"empowering"*, with concomitant increases in confidence, social inclusion and a sense of feeling valued.

One participant, who had previous voluntary experience, explained that since *"volunteers are integral"* to what WHM does, it is flexible in response to its volunteers' needs and does not expect – as some other organisations do – a commitment to work specific hours.

What could be improved or done differently?

When asked how CHILL could be improved, volunteers struggled to make suggestions. However, comments included:

"I got told more than I expected, but I think it's because I asked. I'd like a longer one on violence and one on drugs... I've got everything I need from it" (Volunteer 1).

"I would like some more health training but I wouldn't want it to come at the expense of the other training... We covered mental health in general, but maybe some training on specific areas because I know about depression and things, but I don't know anything on schizophrenia and working with young women, that might come up a lot. Anger management and self harm, things around that, and a bit more on substance abuse, but we did do some drugs training" (Volunteer 3).

Where suggestions were made for improvement, it was reinforced that this should not be at the expense of the existing experience.

Staff had more to say about areas for improvement, but this would be dependent on securing additional funding. This included more training sessions, access to external training, bi-annual training conferences with crèche facilities, the possibility of offering work-shadowing opportunities, and opportunities for women to meet socially. However, one member of staff also pointed out that when valuable training opportunities arise, she is presented with the dilemma of having to decide which volunteers to nominate.

An additional point made by staff was with respect to a perceived need to work toward breaking down barriers associated with social class and education which had occasionally proved a concern. It was acknowledged that many women can be intimidated by working with other women who have had better access to education, are more confident and have higher aspirations to begin with. One staff member asserted:

"I think we just don't recognise enough how intimidating it is and how inaccessible, even just different kinds of languages and different experiences, are for people who've never had that opportunity and been brought up in that culture" (Staff Member 2).

It was understood that this member of staff was referring to volunteers who are perhaps intimidated, to begin with, by students participating in the project. However, it was also pointed out that students can, and do, learn from their non-academic counterparts, who have much to share in terms of real life experience of many of the issues addressed through the project. Indeed, the benefit for students is perceived to be that it enables them to learn about *"the real life issues you don't get in an academic course"*.

Why the women-only context is important

Not all the volunteers had been aware that the CHILL project was exclusive to women prior to their getting involved. For some this had not been a priority, although they acknowledged that the nature of some of the issues covered directly affected women more and would perhaps be difficult to discuss in the presence of men; for example, pregnancy, cervical and breast cancer screening and domestic violence. One volunteer suggested that she would not like it to be a women-only space all the time because

"I think men need to be there as well, because you get a different opinion when there's a man there... but if you're talking about personal, then you need to be in a group of women... I definitely don't feel at ease if I'm talking about private things and there's a man about" (Volunteer 1).

Conversely, another volunteer explained, that although that she had previous experience of volunteering in mixed gender environments, she now realised that *"I just feel that I like helping women"* and, for that reason, WHM/CHILL

"...drew me in very much... I just like that environment of all women. I feel it's safe and nice" (Volunteer 3).

For her, the women-only context enabled her to feel that she can *"say what you feel"*, particularly when people feel vulnerable through ill-health or other problems. CHILL provides them with an opportunity to share with others who can relate to their identity as women with commonalities of experience, feel supported and gain strength. She explained that:

"...they're very empowering and they're all confident and I like the fact it's female. I think when you've had a blow you tend to just want, the fact that they're female, again, it empowers you and it's trust and it's confident because we're all females" (Volunteer 3).

Another volunteer offered a more critical perspective, suggesting that women who are already vulnerable or marginalised need to be reassured that they are among people by whom they will not feel judged:

"I think that because of the nature of work that WMH does, WHM historically worked with young mothers, young adolescents, women from ethnic minorities, women that are disabled, women who are marginalised. They find it hard enough to admit that they are having a problem anyway, so to admit it to a man would be difficult. I think to admit it to a man you've got to be stronger and you've got to be in a place where you can be strong enough to do that because I think that women think that men are often judging them. I think it would devalue the work of CHILL if there were men" (Volunteer 4).

As a disabled woman, this volunteer explained that the gendered nature of the organisation enabled her to move beyond the homogenising label, 'disabled', to acknowledge and assert her needs and rights as a woman and, in doing so, to help other people see beyond 'the chair'. While this volunteer has particular concerns, having been marginalised because of her impairment, she makes a point for all women who experience the multiple burdens of work and care, but who struggle to find a space in which they can identify and give expression to their own needs:

"Historically women haven't had much of a say anyway, so it's about trying to raise the profile of women and the additional challenge of... how you have to do it all - balance the family and balance everything. So trying to say women have to look after themselves first. I think it's very important that women nurture themselves, so it's trying to get that messages across that you have to be your biggest friend and your biggest strength and finding solidarity with other women" (Volunteer 4).

According to these volunteers, WHM/CHILL provides such a space.

Key findings

- Volunteers from a range of social and cultural backgrounds access CHILL with an assortment of skills and experiences and personal objectives - from developing employability to extending their social networks.
- CHILL offers a flexible and inclusive programme of activities to prepare and support volunteers wishing to work either with WHM or in their local communities. Volunteers highlighted enabling factors which facilitated their ongoing participation in the project. These include: help with childcare and travel costs, help with organising transport, personal assistant help, flexibility and support and advice.
- Volunteers spoke highly of the focus and content of activities. It was stated that these were invaluable in preparing volunteers for running their own groups, exposing them to range of issues that they might have to confront, and encouraged them to challenge their own perceptions. These issues ranged from confidentiality, expectations and facilitation, through to health matters, multiple forms of discrimination, domestic violence and child protection.
- Volunteers valued the participatory and interactive manner in which activities were delivered. This emphasised dialogue between participants, rather than conventional methods of learning. Although the training took longer than expected, it was acknowledged that this was necessary in order to develop trust and rapport between participants which was important during discussions concerning particularly sensitive matters.
- Volunteers acknowledged that the women-only environment was important, particularly when addressing sensitive issues. The gendered context was described as *"empowering"*, as non-judgemental and provided an opportunity to find *"solidarity with other women"*.
- WHM was perceived to be distinct from other voluntary organisations because of the variety of activities offered, the practical and personal support provided to volunteers and its flexibility in response to volunteers' needs.
- Volunteers reflected upon the project extremely positively, with outcomes including adaptation of health behaviours, increased confidence, self-esteem and social inclusion, and increased awareness of the multiple forms of discrimination, abuse and the social difficulties experienced by many women. There were many examples of personal outcomes from participation in the project.

Areas for potential improvement

- Volunteers reported that CHILL had exceeded their expectations. Where suggestions for improvement were made, these included more health training, including particular aspects of mental health and also drugs and violence. However, it was asserted that this should not be done at the expense of any other aspects of the training.
- Staff indicated that there were areas that they would like to strengthen. These included more training sessions, access to external training, the possibility of offering work-shadowing opportunities, and opportunities for

women to meet socially. These would be dependent on access to funding. It was also acknowledged that ongoing work needs to be done in overcoming social class barriers which can exclude some women.